

Receipt

PTO/SB/21 (05-03)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/653,498
	Filing Date	August 31, 2000
	First Named Inventor	Heidenreich, Sharon K.
	Art Unit	3627
	Examiner Name	James S. McClellan
Total Number of Pages in This Submission	Attorney Docket Number	020375-021100US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Corrected Filing Receipt Copy of filing receipt showing corrections Corrected Declaration Statement Under 37 CFR 3.73(b) Copy of Recordation Form Cover Sheet & Assignment filed Return Postcard
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Townsend and Townsend and Crew LLP Patrick M. Boucher Reg. No. 44,037
Signature	
Date	August 19, 2003

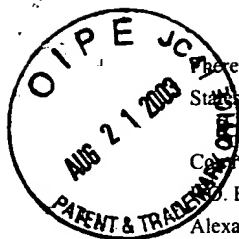
CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Nina L. McNeill		
Signature		Date	August 19, 2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

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PATENT
Attorney Docket No.: 020375-021100US

On August 19, 2003

TOWNSEND and TOWNSEND and CREW LLP

By Nina L. McNeill
Nina L. McNeill

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Sharon K. Heidenreich et al.

Application No.: 09/653,498

Filed: August 31, 2000

For: CONTROL SYSTEM AND
METHOD FOR CURRENCY
EXCHANGE AND MERCHANDISE
SALES

Examiner: James S. McClellan

Art Unit: 3627

REQUEST FOR CORRECTED FILING
RECEIPT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Attached is a copy of the official Updated Filing Receipt received from the Patent and Trademark Office in the above-noted application for which issuance of a corrected filing receipt is respectfully requested. The corrections are marked in red ink on the filing receipt.

There is an error listing the ATTY DOCKET NO. It should read as follows:

020375-021100US

There is an error listing the attorney of record. It should read as follows:

**Townsend and Townsend and Crew, LLP
Two Embarcadero Center, 8th Floor
San Francisco, CA 94111**

There is an error listing Inventor #2, Anthony J. Selway's, residence city and state. It should read as follows:

Mesa, AZ

There is an error listing Inventor #3, Woodrow Hendricks Danda's, residence city and state. It should read as follows:

Vancouver, British Columbia

There is an error listing Inventor #4, Daniel Ebert's correct name and residence city and state. It should read as follows:

Daniel J. Ebert, Littleton, CO

There is an error listing Inventor #6, Jeffrey Shafer's, correct name. It should read as follows:

Jeff D. Shafer

The corrections are evidenced by the Corrected Declaration attached.

A corrected filing receipt is respectfully requested. Applicant believes no fee is required for submission of this request. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

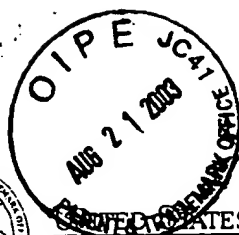


Patrick M. Boucher
Reg. No. 44,037

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, 8th Floor
San Francisco, California 94111-3834
Tel: 303-571-4000
Fax: 415 576-0300

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WASHINGTON, D.C. 20231
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/653,498	08/31/2000	2161	912	00,243	23	24	2

020375-021100US

CONFIRMATION NO. 4793

FILING RECEIPT

~~Shugart Thomson & Kilroy, PC~~
120 West 12th Street
Kansas City, MO 64105

TOWNSEND AND TOWNSEND
AND CREW, LLP

TWO EMBARCADERO CENTER, 8TH FLOOR
SAN FRANCISCO, CA 94111



OC000000005908462

Date Mailed: 03/27/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Sharon K. Heidenreich, Highlands Ranch, CO;
Anthony J. Selway, Denver, CO; *MESA, AZ.*
Woodrow Hendricks Danda, Atlanta, GA; *VANCOUVER, B.C.*
DANIEL J. Daniel Ebert, Highlands Ranch, CO; *LITTLETON, CO*
Gael Ellen Jose, Pinecrest, FL;
JEFF D. Jeffrey Shafer, Highlands Ranch, CO;
Robert F. Drab, Denver, CO;

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 10/19/2000

Projected Publication Date:

Non-Publication Request: No

Early Publication Request: No

Title

Control system and method for currency exchange and merchandise sales



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FOI 9/15 Page 1 of 1
3690
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Bib Data Sheet

CONFIRMATION NO. 4793

SERIAL NUMBER 09/653,498	FILING OR 371(c) DATE 08/31/2000 RULE	CLASS 705	GROUP ART UNIT 3627	ATTORNEY DOCKET NO. 020375-021100US
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APPLICANTS

Sharon K. Heidenreich, Highlands Ranch, CO;
Anthony J. Selway, Mesa, AZ;
Woodrow Hendricks Danda, Vancouver, CANADA;
Daniel J. Ebert, Littleton, CO;
Gael Ellen Jose, Pinecrest, FL;
Jeff D. Shafer, Highlands Ranch, CO;
Robert F. Drab, Denver, CO;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/19/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CO	SHEETS DRAWING 23	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

20350

TITLE

Control system and method for currency exchange and merchandise sales

FILING FEE RECEIVED 912	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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